

U.S. Department of Justice  
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF, <u>Michael T. Keohan</u>	COURT CASE NUMBER <u>13-11446-PBS</u>
DEFENDANT <u>Frank G. Cousins, Sheriff</u>	TYPE OF PROCESS <u>Civil Action</u>
SERVE ➔ { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>114PH CAPE</u>	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>20 Manning Ave</u> <u>Essex County House of Correction Middletown Ma 01949</u>	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	
<div><div>Michael T Keohan 20 Manning Ave Middletown Ma 01949</div><div>Number of process to be served with this Form - 285</div><div>Number of parties to be served in this case</div><div>Check for service on U.S.A.</div></div>	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

Signature of Attorney or other Originator requesting service on behalf of:

☐ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

DATE

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>38</u>	District to Serve No. <u>38</u>	Signature of Authorized USMS Deputy or Clerk <u>AT</u>	Date <u>3/18/14</u>
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I hereby certify and return that I ☒ have personally served. ☐ have legal evidence of service. ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Deputy Wessel

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service  
4/29/14  
Time  
10<sup>00</sup> am

Signature of U.S. Marshal or Deputy

Service Fee <u>130<sup>00</sup></u>	Total Mileage Charges (including and favors) <u>38.00</u>	Forwarding Fee <u>0</u>	Total Charges <u>158-</u>	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

#1 of 3  
Rm 50m.

# UNITED STATES DISTRICT COURT

for the

District of Massachusetts

MICHAEL T. KEOHAN

*Plaintiff(s)*

v.

NAPHCARE MEDICAL PROVIDERS, et al.

*Defendant(s)*

Civil Action No. 13-11446-PBS

## SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

Frank G. Cousins, Sheriff

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Michael T. Keohan, pro se

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: Mar 7, 2014



/s/ Maryellen Molloy  
*Signature of Clerk or Deputy Clerk*